PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875

Application or Docket Number 10 743 089

OR

QR

TOTAL

ADD'L FEE

Substitute for Form PTO-875									10743089		
CLAIMS AS FILED - PART I (Column 1) (Column 2)							SMALL ENTITY		OR	OTHE	R THAN ENTITY
FOR NUME			BER FILE	D NÚMBER EXTRA		7	RATE	FEE	7	RATE	T
BASIC FEE (37 CFR 1.16(a))				·-··	-,· <u></u>	1		\$	OR	INATE	FEI
TC	TAL CLAIMS		minus 20 s			1			1		1,==
(37 CFR 1.16(c)) INDEPENDENT CLAIMS		AIMS	minus 20 = '				X \$=	ļ	OR	× \$=	
(37 CFR 1.16(b))			minus 3 = '				× \$=	ļ	OR	x \$=	
MULTIPLE DEPENDENT CLAIM PRESEI			ENT	(37 CFR 1.16(d))			+ s =		OR	+ \$=	
* If the difference in column 1 is less than zero, enter *0* in column 2.							TOTAL		OR	TOTAL	
	, , ,	CLAIMS AS AN	/ENDE	D – PART II					-		<u> </u>
		(Column 1)	••.	(Column 2)	(Column 3)		SMALL I	ENTITY	OR		R THAN ENTITY
AMENDMENT A	1	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADD TION, FEE
呂	Total (37 CFR 1.16(c))	. 4	Minus	20	=		x \$=		OR	x s=	
EN EN	Independent (37 CFR 1.16(b))	2	Minus	··· 3	=		x \$ =		OR	x \$ =	
₹	FIRST PRESEN	TATION OF MULTIP	LE DEPENO	DENT CLAIM (37 CI	FR 1.16(d))		+ 5 =		OR	+ \$ =	
	*		· *********	ý			TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	
		(Column 1)		(Column 2)	(Column 3)						
MENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	. PRESENT EXTRA		RATE .	ADDI- TIONAL FEE	į	RATE	ADDI TION/ FEE
<u>≅</u>	Total (37 CFR 1.16(c))	•	Minus	••	=		× \$=		OR	X \$ - =	
AMEN	Independent (37 CFR 1.16(b))	•	Minus		=.	Ī	x \$ =		OR	x \$ =	
¥	FIRST PRESEN	TATION OF MULTIPL	E DEPEND	ENT CLAIM (37 CF	R 1.16(d))		+ \$ =		OR	+ \$ =	
							TOTAL ADD'L FEE		. OR	TOTAL ADD'L FEE	
		(Column 1)		÷: (Column 2)	(Column 3)						_
		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI TIONA FEE
≥ 	Total . (37 CFR 1.16(c))	•	Minus	••	=		x \$=		OR	x \$=	
	Independent (37 CFR 1.16(b))	•	Minus .	• • •	=		x \$ =		OR	x \$=	

FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))

TOTAL

ADD'L FEE

[•] If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

[&]quot;If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

^{***} If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.